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(Full Company Name)

**WATER and/or SEWER ANNUAL REPORT**

**Class D**

**TO THE**

**MISSOURI PUBLIC SERVICE COMMISSION**

**For Period Ending December 31, \_\_\_\_\_**

Annual Report of \_\_\_\_\_  
 Water and/or Sewer Supplemental Pages for the year ended December 31, \_\_\_\_\_

1. State in full the exact '**certificated**' name of the Utility Company:

(Do not abbreviate; yet include any Commission approved fictitious name, if applicable.)

\_\_\_\_\_

2. Effective date of certification by the MO Public Service Commission and associated case number:

Date (e.g. 00/00/0000): \_\_\_\_\_ Case No: \_\_\_\_\_

3. Was the company certificated in Missouri under any other name(s)? If yes, please provide all names and time periods involved since the original certification:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. This Utility Company is a (Check box with an X) and under '**Explanation**' list registered name if different than certificated name listed above (e.g. parent corporation name). If '**Other**' is identified, explain:

<u>Type</u>	<u>Explanation</u>
<input type="checkbox"/> Corporation	_____
<input type="checkbox"/> Partnership	_____
<input type="checkbox"/> Sole Proprietorship	_____
<input type="checkbox"/> LLC	_____
<input type="checkbox"/> LP	_____
<input type="checkbox"/> Other	_____

5. Date of incorporation or other original organization (e.g. 00/00/0000):

\_\_\_\_\_

6. Under the laws of what state is the Utility Company organized:

\_\_\_\_\_

7. State in full the name, street address, telephone number, and e-mail address\* of the individual completing/verifying this Annual Report:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(\*) To facilitate electronic sending of the Annual Report next year.

8. Please Provide the following information concerning Total Company **and** Missouri Specific Revenues:

Revenues:	Total Company	MO Specific
Operating Revenues* from Tariffed Services		
Other Revenues		
<b>TOTAL REVENUES</b>		
MO Specific should match Statement of Revenue (FY-2005 Mo.PSC Assessment)		

9. Type of Missouri tax return filed (i.e. MO-1065, MO-1120A, MO-1120S, MO-NRP, MO-NRS etc.):

\_\_\_\_\_

10. Missouri Taxpayer ID:

\_\_\_\_\_

11. In an effort to update our Electronic Filing & Information system (EFIS) with current company contact and address information please provide the following information. Either verify the information through EFIS and initial in space provided or complete each sub-type and the Data Center Staff will update as required.

**a. Official Representative of the Company:**

*Information contained in EFIS is current:* \_\_\_\_\_

Name: \_\_\_\_\_ initials  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**b. Consumer Services:**

*Information contained in EFIS is current:* \_\_\_\_\_

Name: \_\_\_\_\_ initials  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**c. Individual to receive statement of revenue (assessment):**

*Information contained in EFIS is current:* \_\_\_\_\_

Name: \_\_\_\_\_ initials  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address (\*): \_\_\_\_\_

(\*) To facilitate electronic sending of the statement of revenue next year.

**In addition provide specific contacts for areas (d. through n.) if applicable on the following pages. In lieu of additional contacts being provided, designate if a, b, or c, above should be identified as the contact.**

**d. Tariff:**

*Information contained in EFIS is current:* \_\_\_\_\_

Name: \_\_\_\_\_ initials  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

Annual Report of \_\_\_\_\_

Water and/or Sewer Supplemental Pages

for the year ended December 31, \_\_\_\_\_

**11. continued**

**e. CFO/Comptroller:**

*Information contained in EFIS is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_

Street/ PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**f. Technical:**

*Information contained in EFIS is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_

Street/ PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**g. Surveillance:**

*Information contained in EFIS is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_

Street/ PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**h. In-House Attorney:**

*Information contained in EFIS is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_

Street/ PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**i. Attorney:**

*Information contained in EFIS is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_

Street/ PO Box: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Annual Report of \_\_\_\_\_  
Water and/or Sewer Supplemental Pages for the year ended December 31, \_\_\_\_\_  
**11. continued**

**j. Consultant:**

*Information contained in EFIS  
is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**k. Other:**

*Information contained in EFIS  
is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**l. Regulatory:**

*Information contained in EFIS  
is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**m. Area Contact Entry:**

*Information contained in EFIS  
is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**n. Carrier Billing Relations:**

*Information contained in EFIS  
is current:* \_\_\_\_\_

initials

Name: \_\_\_\_\_  
Street/ PO Box: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone number: \_\_\_\_\_  
Fax number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

# INSTRUCTIONS FOR FILLING OUT ANNUAL REPORT FORMS FOR CLASS "D" WATER AND SEWER UTILITIES

## GENERAL INSTRUCTIONS

In examining the report form you will note there are various references requiring water information and sewer information on the same page.

If you have water operations only, you should complete all information for water utilities. Any requested information for sewer data should be clearly marked **BY YOU** as **NOT APPLICABLE**.

If you have sewer operations only, you should complete all information requested for sewer utilities. Any requested information for water data should be clearly marked **BY YOU** as **NOT APPLICABLE**.

If you are a joint utility in that you have both water and sewer operations, **YOU SHALL FILL OUT ALL PARTS OF ALL PAGES COMPLETELY TO THE BEST OF YOUR AVAILABLE INFORMATION, ABILITY AND BELIEF**. You will note that all pages on Lines 1 and 2 require the year of the report and the company name. This **MUST** be completed on all pages.

If you have any questions regarding this report form, or the required information, you may contact the Water and Sewer Department at (314) 751-7074 or the Accounting Department at (314) 751-5026. Our mailing address is: Missouri Public Service Commission; P.O. Box 360; Jefferson City, Missouri 65102. This annual report is normally due on or before April 15th. **FAILURE** to timely file this report **COULD** result in **PENALTIES** up to \$100 for every day the report is late.

## PAGE 1 INSTRUCTIONS

On Page 1, provide the **FULL** company name as it appears on your certificate of convenience and necessity, the official company address and the primary phone number. On Line 6 **CIRCLE** either or both **WATER** or **SEWER** depending upon utility service provided. On Lines 7 through 13, provide names, address and phone numbers of any persons who can be contacted concerning information contained in this report. On Lines 14 through 20 provide names, address and phone numbers of any persons who can be contacted concerning plant operations. Finally, on Page 1, the President or Chief Operations Officer **MUST** certify that all information contained in the annual report is true and correct in all known facts and beliefs. This party should examine the annual report and be satisfied as to its accuracy prior to taking the oath.

## PAGE 2 INSTRUCTIONS

On Line 3 provide the date of original organization of the utility. On Line 4 provide the date the original certificate of convenience and necessity was granted by this Commission. On Lines 5 through 9 provide for each class and/or series of common and/or preferred stock the total number of shares authorized by charter, the par or stated value per share and the total number of shares issued.

On Lines 10 through 19 provide the names, addresses and numbers of votes resulting from stock ownership as of December 31. If any such holder held the stock in trust, state the nature of the trust and the beneficial owner. On Line 21, provide the total number of votes of all securities with voting rights.

### **PAGE 3 INSTRUCTIONS**

On Page 3 describe all transactions occurring during the year which will have a major effect on operations. These transactions may be rate changes, the replacement of major equipment, and any other **ABNORMAL** cash expenditure amounting to \$250 or more. Please note that if the expenditure is of a normal and recurring nature (i.e. monthly electric bills) it should not be classified as an abnormal item.

### **PAGE 4 INSTRUCTIONS**

The dollar amount for lines 3, 4, 6, 10, 11 and 13 should be brought forward from the appropriate page and line as indicated.

Construction work in progress: Include the total amount of work for utility plant in process of construction but not ready for service at the end of the year.

Plant held for future use: Include the original cost of property owned and held for future use under a definite plan for use.

Plant acquisition adjustment: This shall include the purchase price of any plant purchased less the original cost, estimated if not known less any depreciation reserve.

### **PAGE 5 INSTRUCTIONS**

The dollar amount for lines 11, 12, 16 and 17 should be brought forward from the appropriate page and line as indicated.

Customer Deposits: Include all deposits with the utility by customers as security for payment of bills.

Advances for Construction: Include advances by any applicant for construction which is to be refunded either in part or completely.

C.I.A.C.: Include any donation or contribution in cash or services, or property from any company, individual, agency or others for construction purposes. All supporting entries shall be kept so that the utility can furnish information regarding the purpose of each donation, and the amount of the donation.

(Note: There shall not be any advances for construction which are to be repaid in part or completely included in this account except if not returned by the time specified in the utilities tariff.)

**TOTAL FROM PAGE 5 MUST BALANCE WITH TOTAL FROM PAGE 4.**

### **PAGE 6 INSTRUCTIONS**

On Page 6 provide information for all customer sales determined to be uncollectible. You should identify the customer, the methods used to attempt collection, the amount and why it is uncollectible (i.e. customer filed bankruptcy, left town, etc.). This uncollectible amount is an expense to be recorded on the Income Statement (Page W-1 and/or S-1).

### **PAGE 7 INSTRUCTIONS**

On Page 7 provide information regarding payroll. Provide names, titles and salaries of all officers and employees. Provide total compensation paid to each during the year including bonuses and other allowances. Identify the total compensation as chargeable to water expense, sewer expense or construction. Also identify any employee who did not receive any compensation during the year.

### **PAGE 8 INSTRUCTIONS**

On Page 8 provide information regarding professional services the utility company received. Report all information concerning rate, management, construction, engineering, research, financial, valuation, legal, accounting, purchasing, advertising, labor relations, public relations, or other similar professional services rendered the respondent under written or verbal arrangements, for which total payments during the year to any corporation, partnership, individual (other than for services as an employee), or organization of any kind whatever.



### **PAGE 9 INSTRUCTIONS**

On Page 9 provide information regarding contributions in aid of construction and the amortization of contributions in aid of construction. This account shall include donations or contributions in cash, services, or property for construction purposes. The records supporting the entries to this account shall be so kept that the utility can furnish information as to the purpose of each donation, the conditions, if any, upon which it was made, the amount of each donation, and the amount applicable to each utility department. The credits (deductions) to this account shall not be transferred to any other account without the approval of the Commission.

### **PAGE 10 INSTRUCTIONS**

On Page 10 provide all required information concerning interest expense, notes payable, bonds, bank loans and other financial debts that existed during the year. For **EACH** debt on which interest was paid during the year, provide the name and address of the lender, the date of maturity, the loan balance, the interest rate on the loan and the amount of interest paid. The amount of interest paid should be assigned to water utility expense and/or sewer utility expense based upon which utility was responsible for the loan.

### **PAGE 11 INSTRUCTIONS**

On Page 11 provide descriptions, quantities and dollar costs of materials and supplies in inventory. These items may be pipe, wire, gasoline, diesel, etc. You should identify the cost and assign the cost to either water or sewer.

### **PAGES W-1, W-2, W-3 AND/OR S-1, S-2, S-3 INSTRUCTIONS**

On Pages W-1, W-2, W-3 and/or S-1, S-2, S-3 provide information regarding all billed revenues, expenses, customer numbers and gallon sales.

### **PAGE W-4 INSTRUCTIONS**

On Page W-4 provide information regarding quantities of water from **EACH** source of supply which entered the system. On Line 19 provide data regarding the maximum and minimum quantities of water supplied in any one day. On Line 20, provide the range of pressures which exist at the highest point on the system. On Lines 21 and 22, provide information regarding any sale of water for resale.

### **PAGES W-5, W-6, AND/OR S-4, S-5 INSTRUCTIONS**

On Pages W-5, W-6 and/or S-4, S-5 provide information regarding water and/or sewer utility plant in service, depreciation expense and depreciation reserve. Columns B, C, D and E require **ORIGINAL COST** plant in service, plant additions and plant retirements. These entries should be supported by **books and records** which identify the property and its location. Column F should identify the depreciation rates used. Depreciation rates prescribed by Commission Order **MUST** be used, if available. Column G is the calculated depreciation expense using end of year plant in service (Column E). The depreciation reserve is reflected in Columns H, I, J, K, L and M. Please note that Columns D and I should reflect the same amounts.

### **PAGE W-7 INSTRUCTIONS**

On Page W-7 provide historical and statistical information regarding water pumps and wells.

### **PAGE W-8 INSTRUCTIONS**

On Page W-8 provide historical and statistical information regarding water meters, meter settings and storage facilities.

### **PAGE W-9 INSTRUCTIONS**

On Page W-9 provide historical information regarding the feet of water mains and number of service lines by size and type.

### **PAGE S-6 INSTRUCTIONS**

On Page S-6 provide historical and statistical information regarding sewer treatment facilities, lift stations and feet of collecting sewers by size and type.

2 COMPANY NAME: \_\_\_\_\_

3 COMPANY ADDRESS: \_\_\_\_\_

4 \_\_\_\_\_

5 COMPANY PHONE NUMBER: \_\_\_\_\_

6 UTILITY SERVICE(S) PROVIDED: WATER SEWER (Circle areas)

NAME, ADDRESS, AND PHONE NUMBER OF PERSON(S) TO CONTACT CONCERNING  
INFORMATION CONTAINED IN THIS REPORT:

7 \_\_\_\_\_

8 \_\_\_\_\_

9 \_\_\_\_\_

10 \_\_\_\_\_

11 \_\_\_\_\_

12 \_\_\_\_\_

13 \_\_\_\_\_

NAME, ADDRESS, AND PHONE NUMBER OF PERSON(S) TO CONTACT CONCERNING  
PLANT OPERATIONS:

14 \_\_\_\_\_

15 \_\_\_\_\_

16 \_\_\_\_\_

17 \_\_\_\_\_

18 \_\_\_\_\_

19 \_\_\_\_\_

23 \_\_\_\_\_

CERTIFICATIONI HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN AND ATTACHED TO  
THIS ANNUAL REPORT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND  
BELIEF.

21 DATE: \_\_\_\_\_ TITLE: \_\_\_\_\_

22 SIGNATURE: \_\_\_\_\_

2 Company Name: \_\_\_\_\_

3 Date of Original Organization of Utility: \_\_\_\_\_

4 Date of Original Certificate of Convenience and Necessity: \_\_\_\_\_

**CAPITAL STOCK (COMMON AND PREFERRED)**

	Class and Series of Stock	Number of Shares Authorized	Par or Stated Value Per Share	Number of Shares Issued
5				
6				
7				
8				
9				

**SECURITY HOLDERS AND VOTING POWERS**

Report below the **NAMES AND ADDRESS** of the ten stockholders who, at the end of the year, had the greatest voting powers in the respondent, **AND STATE THE NUMBER OF VOTES** each would have had a right to cast on that date. If any such holder held in trust, give the nature of the trust and the beneficial owner. Show also total votes of **ALL** securities with voting powers.

	Names and Addresses	Number of votes
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		

20 Total Number of Votes Held by Above \_\_\_\_\_

21 Total Number of Votes of all Securities with Voting Powers \_\_\_\_\_

2 Company Name: \_\_\_\_\_

Describe **major** transactions occurring during year which will have a major effect on operations, such as rate changes, replacement of equipment, and other abnormal cash expenditures of **\$250** or more.

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

7 \_\_\_\_\_

8 \_\_\_\_\_

9 \_\_\_\_\_

10 \_\_\_\_\_

11 \_\_\_\_\_

12 \_\_\_\_\_

13 \_\_\_\_\_

14 \_\_\_\_\_

15 \_\_\_\_\_

16 \_\_\_\_\_

17 \_\_\_\_\_

18 \_\_\_\_\_

19 \_\_\_\_\_

20 \_\_\_\_\_

21 \_\_\_\_\_

22 \_\_\_\_\_

23 \_\_\_\_\_

24 \_\_\_\_\_

25 \_\_\_\_\_

26 \_\_\_\_\_

27 \_\_\_\_\_

28 \_\_\_\_\_

29 \_\_\_\_\_

2 Company Name: \_\_\_\_\_

**BALANCE SHEET  
WATER AND SEWER OPERATIONS  
ASSETS**

	Amount
3 <u>Water Plant in Service (pg. W-5, Line 46, Col. E)</u>	
4 <u>Less: Water Depreciation Reserve (pg. W-6, Line 46, Col. M)</u>	
5 <u>Net Water Plant in Service (Line 3 less Line 4)</u>	
6 <u>Water Materials and Supplies (Pg. 11, Line 25)</u>	
7 <u>Water Construction Work in Progress</u>	
8 <u>Water Plant held for future use (attach explanation)</u>	
9 <u>Water Plant Acquisition Adjustment</u>	
10 <u>Sewer Plant in Service (pg. S-4, Line 24, Col. E)</u>	
11 <u>Less: Sewer Depreciation Reserve (pg. S-5, Line 24, Col. M)</u>	
12 <u>Net Sewer Plant in Service (Line 10 less Line 11)</u>	
13 <u>Sewer Materials and Supplies (Pg. 11, Line 25)</u>	
14 <u>Sewer Construction Work in Progress</u>	
15 <u>Sewer Plant held for future use (attach explanation)</u>	
16 <u>Sewer Plant Acquisition Adjustment</u>	
17 <u>Other Plant (attach explanation)</u>	
18 <u>Cash</u>	
19 <u>Other Assets (Accounts Receivable, etc.) (attach explanation)</u>	
20 <b>Total Assets</b>	

2 Company Name: \_\_\_\_\_

**BALANCE SHEET  
WATER AND SEWER OPERATIONS  
EQUITY AND LIABILITIES**

	Amount
3 Capital Stock	
4 Retained Earnings	
5 Long Term Debt to Affiliates (owners, other owner controlled companies, etc.)	
6 Short Term Debt to Affiliates (owners, other owner controlled companies, etc.)	
7 Long Term Debt (banks, etc.)	
8 Short Term Debt (banks, etc.)	
9 Water Customer Deposits	
10 Water Advances for Construction	
11 Water CIAC (Pg. 9, Line 15)	
12 Water Amortization of CIAC (Pg. 9, Line 22)	
13 Net Water CIAC (Line 11 less Line 12)	
14 Sewer Customer Deposits	
15 Sewer Advances for Construction	
16 Sewer CIAC (Pg. 9, Line 15)	
17 Sewer Amortization of CIAC (Pg. 9, Line 22)	
18 Net Sewer CIAC (Line 16 less Line 17)	
19 Deferred Taxes - ITC	
20 Deferred Taxes - Other (attach explanation)	
21 Other Liabilities (Accounts Payable, etc.) (attach explanation)	
22 Total Equity and Liabilities	

2 Company Name: \_\_\_\_\_

### SCHEDULE OF UNCOLLECTIBLE ACCOUNTS

Describe customer account and methods used to attempt collection. Also, state why account is uncollectible (Bankruptcy, etc.)		Amount Written Off	
		Water Utility	Sewer Utility
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26			
27			
28	Totals		



2 Company Name: \_\_\_\_\_

**PAYROLL INFORMATION**

Names, titles and salaries of all officers and employees. Show total compensation paid to each during the year. Include all amounts including bonuses and other allowances. Enter 0 or none where applicable. Provide explanations where necessary. Use additional sheets where necessary.

	Name and Title	Total Utility Compensation	Payroll Charged To		Capitalized Payroll
			Water Expense	Sewer Expense	
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15	Totals		(To Page W-1)	(To Page S-1)	

2 Company Name: \_\_\_\_\_

**PAYMENTS FOR SERVICES RENDERED BY OTHER THAN EMPLOYEES**

Report below all information concerning rate, management, construction, engineering, research, financial, valuation, legal, accounting, purchasing, advertising, labor relations, public relations, or other similar professional services rendered the respondent under written or verbal arrangements, for which total payments during the year to any corporation, partnership, individual (other than for services as an employee), or organization of any kind whatever. Use additional sheets where necessary.

	Name of Recipient and Description of Service	AMOUNT OF PAYMENTS			
		Water		Sewer	
		Expensed	Capitalized	Expensed	Capitalized
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
	<b>Totals</b>				

(Page W-1)

(Page S-1)

2 Company Name: \_\_\_\_\_

**CONTRIBUTIONS IN AID OF CONSTRUCTION**

This account shall include donations or contributions in cash, services, or property for construction purposes. The records supporting the entries to this account shall be so kept that the utility can furnish information as to the purpose of each donation, the conditions, if any, upon which it was made, the amount of each donation, and the amount applicable to each utility department. The credits (deductions) to this account shall not be transferred to any other account without the approval of the Commission.

	Water	Sewer
3 Balance First of Year		
4 Additions During Year (Explain in detail)		
5 _____		
6 _____		
7 _____		
8 _____		
9 _____		
10 Less: Deductions During Year (Explain in detail) _____		
11 _____		
12 _____		
13 _____		
14 _____		
15 Balance at End of Year _____		

**AMORTIZATION OF CONTRIBUTIONS IN AID OF CONSTRUCTION**  
**(PLEASE IDENTIFY AS ACCOUNT NUMBER 271A)**

16 Balance at First of Year _____		
17 Total Contributions in Aid at End of Year (Line 15) _____		
18 Total Plant in Service at End of Year (Page W-5 or S-4) _____		
19 % Contributions To Plant (Line 17 ÷ Line 18) _____		
20 Total Depreciation Expense (Page W-6 or S-5) _____		
Total Amortization of Contributions (Line 19 × Line 20)		
21 (Take Total To Page W-1 or S-1) _____		
22 Balance at End of Year (Line 16 + Line 21) _____		

2 Company Name: \_\_\_\_\_

**INTEREST EXPENSE, NOTES PAYABLE, BONDS, BANK LOANS AND OTHER DEBTS**

Report information for each separate item of debt. Show principal amount to which each interest rate applies. Include all items on which interest was paid during year. Use additional sheets where necessary.

	Description of Obligation (Include Name and Address of Each Lender)	Date of Maturity	Loan Amount	Interest		Interest Charged To	
				Rate	Paid	Water Utility	Sewer Utility
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19	<b>Totals</b>						

2 Company Name: \_\_\_\_\_

**SCHEDULE OF MATERIALS AND SUPPLIES AVAILABLE AT END OF YEAR**

	Description of Items (Pipe, Meters, Fittings, Valves, Gas, etc.)	Water		Sewer	
		Quantity	Amount	Quantity	Amount
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25	<b>Totals</b>				

2 Company Name: \_\_\_\_\_

**WATER OPERATING REVENUES, EXPENSES AND STATISTICS**

Amount

3	Total Operating Revenues (From Page W-2, Line 24)	
	<b>Operating Expenses</b>	
4	Salaries & Wages (From Page 7, Line 15)	
5	Employee Pensions and Benefits	
6	Purchased Water	
7	Plant Operations Expenses (From Page W-3, Line 11)	
8	Billing Expenses	
9	Supplies and Expenses	
10	Transportation Expenses	
11	Rent Expense (Attach Explanation)	
12	Insurance Expense	
13	Outside Services Employed (Legal, Accounting, etc.) (From Page 8)	
14	Regulatory Commission Expenses	
15	Uncollectible Expenses (From Page 6, Line 28)	
16	Depreciation Expense (From Page W-6, Line 46)	
17	Amortization of contributions in aid of construction (Page 9)	( )
18	Amortization Expense	
19	Tax Expenses (From Page W-3, Line 19)	
20	Interest Expense (From Page <sup>10</sup> <del>7</del> , Line 19)	
21	Other Expenses (Attach Explanation)	
22	Total Operating Expenses	
23	Net Income (Loss) (Line 3 less Line 22)	

2 Company Name: \_\_\_\_\_

**WATER OPERATING REVENUES EXPENSES AND STATISTICS (Continued)**

(Please indicate if metered amounts are in cubic feet measurements)

		Number of Customers		Gallons Sold 000's	Revenue Amount
		First of Year	End of Year	Omitted	
<b>Unmetered Sales of Water</b>					
3	Residential - Single Family			XXXX	
4	Residential - Apartments			XXXX	
5	Residential - Mobile Homes			XXXX	
6	Commercial			XXXX	
7	Other Sales to Public Authorities			XXXX	
8	Other (Attach Explanation)			XXXX	
9	<b>Total Unmetered Sales</b>			XXXX	
<b>Metered Sales of Water</b>					
10	5/8" Meter				
11	3/4" Meter				
12	1" Meter				
13	1 1/2" Meter				
14	2" Meter				
15	Other (Attach Explanation)				
16	<b>Total Metered Sales</b>				
<b>Other Operating Revenues</b>					
17	Late Payment Fees				
18	Inspection Fees				
19	Reconnect Fees				
20	Rent Income				
21	Income from Merchandising, Jobbing & Contract Work (Attach Explanation)				
22	Other Revenue (Attach Explanation)				
23	<b>Total Other Operating Revenues</b>				
24	<b>Total Operating Revenues</b>	Take Total to Page W-1 Line			

2 Company Name: \_\_\_\_\_

**WATER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)**

	Amount
<b>Plant Operations Expenses</b>	
3 <u>Repairs of Water Plant - Pump Repair</u>	
4 <u>Repairs of Water Plant - Well Repair</u>	
5 <u>Repairs of Water Plant - Water Line Repair</u>	
6 <u>Repairs of Water Plant - Equipment Repair</u>	
7 <u>Repairs of Water Plant - Other (Attach Explanation)</u>	
8 <u>Fuel or Power Purchased for Pumping (Elect. Bills, etc.)</u>	
9 <u>Chemicals</u>	
10 <u>Water Testing Expenses</u>	
11 <b>Total Plant Operations Expenses (Take Total to Page W-1 Line 7)</b>	
<b>Tax Expenses</b>	
12 <u>- Tax Expense - Property Taxes</u>	
13 <u>Tax Expense - Payroll Taxes</u>	
14 <u>Tax Expense - Franchise Taxes</u>	
15 <u>Tax Expense - Other Taxes</u>	
16 <u>Tax Expense - Federal Income Taxes</u>	
17 <u>Tax Expense - State Income Taxes</u>	
18 <u>Tax Expense - Investment Tax Credits</u>	
19 <b>Total Tax Expenses (Take Total to Page W-1, Line 19)</b>	



2 Company Name: \_\_\_\_\_

**PUMPING AND PURCHASED WATER STATISTICS**

Omit 000 In Reporting Number of Gallons or Cubic Feet of Water. Use Additional Sheets if Necessary.

3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	Gallons Pumped Into System	Source of Supply (Describe Below)				Total Of All Methods (A+B+C+D=E)
		(A)	(B)	(C)	(D)	(E)
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
Total for Year						

19 Maximum Quantity Supplied To The System In Any One Day \_\_\_\_\_ Date \_\_\_\_\_; Minimum \_\_\_\_\_ Date \_\_\_\_\_

20 Range of Pressure in the Mains As Measured at the Highest Point on System: \_\_\_\_\_

If Water is Sold To Other Utilities For Resale, List Names, Addresses, Phone Numbers, and Quantities Below:

21 \_\_\_\_\_

22 \_\_\_\_\_

Company Name: \_\_\_\_\_

WATER UTILITY PLANT

ACCOUNTS (a)	Balance First of Year (b)	Additions During Year (c)	Retirements During Year (d)	Balance End of Year (e)
INTANGIBLE PLANT				
3 Organization (301) .....				
4 Franchise and consents (302) .....				
5 Miscellaneous intangible plant (303) .....				
SOURCE OF SUPPLY PLANT				
6 Land and land rights (310) .....				
7 Structures and improvements (311) .....				
8 Collecting and impounding reservoirs (312) .....				
9 Lake, river and other intakes (313) .....				
10 Wells and springs (314) .....				
11 Infiltration galleries and tunnels (315) .....				
12 Supply mains (316) .....				
13 Other water source plant (317) .....				
PUMPING PLANT				
14 Land and land rights (320) .....				
15 Structures and improvements (321) .....				
16 Boiler plant equipment (322) .....				
17 Other power production equipment (323) .....				
18 Steam pumping equipment (324) .....				
19 Electric pumping equipment (325) .....				
20 Diesel pumping equipment (326) .....				
21 Hydraulic pumping equipment (327) .....				
22 Other pumping equipment (328) .....				
WATER TREATMENT PLANT				
23 Land and land rights (330) .....				
24 Structures and improvements (331) .....				
25 Water treatment equipment (332) .....				
TRANSMISSION AND DISTRIBUTION PLANT				
26 Land and land rights (340) .....				
27 Structures and improvements (341) .....				
28 Distribution reservoirs and standpipes (342) .....				
29 Transmission and distribution mains (343) .....				
30 Fire mains (344) .....				
31 Services (345) .....				
32 Meters (346) .....				
33 Hydrants (348) .....				
34 Other transmission and distribution plant (349) .....				
GENERAL PLANT				
35 Land and land rights (389) .....				
36 Structures and improvements (390) .....				
37 Office furniture and equipment (391) .....				
38 Transportation equipment (392) .....				
39 Stores equipment (393) .....				
40 Tools, shop and garage equipment (394) .....				
41 Laboratory equipment (395) .....				
42 Power-operated equipment (396) .....				
43 Communication equipment (397) .....				
44 Miscellaneous equipment (398) .....				
45 Other tangible property (399) .....				
46 TOTAL WATER UTILITY PLANT IN SERVICE .....				

\*All entries should be supported by records which identify the property being added or retired, its location, and its original cost in as much detail as reasonably possible. If adjustments are included in columns "C" and or "D" please explain below. Use additional sheets if necessary.

## DEPRECIATION RESERVE - WATER UTILITY PLANT

			Retirements of Property				
Annual Depre. Rate % (f)	Annual Depre. Expense (e x f)	Balance First of Year (h)	Book Cost of Plant Retired (i)	Cost of Removal (j) *	Salvage Credit (k) *	Other Changes (l) **	Balance End of Year (m)
3							
4							
5							
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35							
36							
37							
38							
39							
40							
41							
42							
43							
44							
45							
46							

**NOTE:** Amounts included in Column "I" should be the same as in "D" on the preceeding page.

\*All entries included in Columns "J" and "K" should be supported by records which identify the property retired and the cost of removal or salvage in as much detail as reasonably possible.

\*\*Report the details for these entries. Use additional sheets if necessary.

2 Company Name: \_\_\_\_\_

### PUMPS

	Manufacturer and Type (i.e. High Service, Well, Standby, etc.)	Capacity	Date Installed	Date of Last Motor Replacement	Date of Last Pump Replacement
3					
4					
5					
6					
7					
8					

### WELLS

	Number _____	Number _____	Number _____	Number _____
9				
10	Description (Deep, artesian,			
11	Spring, etc.)			
12	Year Constructed			
13	Type of Construction			
14	Type of Casing			
15	Depth and Diameter of Well			
16	Yield of Well in Gallons Per Day			
17	Chemicals (Provide Type, Cost			
18	and Quantities of Each			
19				
20				
21				

Company Name: \_\_\_\_\_

### METERS AND METER SETTINGS

Customer Class (A)	Meter Size (B)	Total At First of Year (C)	Total Number Added (D)	Total Number Removed or Disconnected (E)	Total At End of Year (F)	Total Number Owned By Customers At End of Year (G)
Residential:						
Other Customers:						
Total in Use By Customers	xxxxxx					
Not In Use (Inventory)						xxxxxxxxxx
						xxxxxxxxxx
						xxxxxxxxxx
Total Meter Settings	xxxxxx					

### STORAGE FACILITIES

Type of Storage: i.e., Pneumatic, Ground, Standpipes, Elevated Tanks, Etc.	Construction Material	Last Date Painted If Applicable	Capacity

2 Company Name: \_\_\_\_\_

**MAINS (FEET)**

	Kind of Pipe (Case Iron, Galvanized Iron, Plastic, etc.) (A)	Diameter of Pipe (B)	Total First of Year (C)	Total Added (D)	Total Removed or Abandoned (E)	Total End of Year (F)
3						
4						
5						
6						
7						
8						

**SERVICES AVAILABLE FOR USE (FROM MAIN TO PROPERTY LINE)**

Owned By Utility

	Size and Description By Type of Material (i.e., Iron, Copper, Plastic, etc.)	Total At First of Year	Total Number Added	Total Number Retired or Abandoned	Total At End of Year	Total Number Owned By Customers End of Year
9	<u>In Use:</u>					
10						
11						
12						
13	<u>For Future Use:</u>					XXXXXX
14						XXXXXX
15						XXXXXX
16	<u>Total of All Services</u>					

2 Company Name: \_\_\_\_\_

**SEWER OPERATING REVENUES, EXPENSES AND STATISTICS**

	Amount
3 <u>Total Operating Revenues (From Page S-2, Line 21)</u>	
<b>Operating Expenses</b>	
4 <u>Salaries &amp; Wages (From Page 7, Line 15)</u>	
5 <u>Employee Pensions and Benefits</u>	
6 <u>Contracted Treatment Expenses</u>	
7 <u>Plant Operations Expenses (From Page S-3, Line 13)</u>	
8 <u>Billing Expenses</u>	
9 <u>Supplies and Expenses</u>	
10 <u>Transportation Expenses</u>	
11 <u>Rent Expense (Attach Explanation)</u>	
12 <u>Insurance Expense</u>	
13 <u>Outside Services Employed (Legal, Accounting, etc.) (From Page 8)</u>	
14 <u>Regulatory Commission Expenses</u>	
15 <u>Uncollectible Expenses (From Page 6, Line 28)</u>	
16 <u>Depreciation Expense (From Page S-5, Line 24)</u>	
17 <u>Amortization of contributions in aid of construction (Page 9)</u>	( )
18 <u>Amortization Expense</u>	
19 <u>Tax Expenses (From Page S-3, Line 21)</u>	
20 <u>Interest Expense (From Page <sup>10</sup><del>3</del>, Line 19)</u>	
21 <u>Other Expenses (Attach Explanation)</u>	
22 <b>Total Operating Expenses</b>	
23 <b>Net Income (Loss) (Line 3, Less Line 22)</b>	

2 Company Name: \_\_\_\_\_

**SEWER OPERATING REVENUES EXPENSES AND STATISTICS (Continued)**

(Please indicate if metered amounts are in cubic feet measurements)

		Number of Customers		Gallons Sold 000's	Revenue Amount
		First of Year	End of Year	Omitted	
<b>Flat Rate Sales</b>					
3	Residential - Single Family			XXXX	
4	Residential - Apartments			XXXX	
5	Residential - Mobile Homes			XXXX	
6	Commercial			XXXX	
7	Other Sales to Public Authorities			XXXX	
8	Other (Attach Explanation)			XXXX	
9	<b>Total Unmetered Sales</b>			XXXX	
<b>Metered Sales of Water</b>					
10	Commercial				
11	Other Sales to Public Authorities				
12	Other (Attach Explanation)				
13	<b>Total Metered Sales</b>				
<b>Other Operating Revenues</b>					
14	Late Payment Fees				
15	Inspection Fees				
16	Reconnect Fees				
17	Rent Income				
18	Income from Merchandising, Jobbing & Contract Work (Attach Explanation)				
19	Other Revenue (Attach Explanation)				
20	<b>Total Other Operating Revenues</b>				
21	<b>Total Operating Revenues</b>				

Take Total to Page S-1 Line 3



2 Company Name: \_\_\_\_\_

**SEWER OPERATING REVENUES, EXPENSES AND STATISTICS (Continued)**

	Amount
<b>Plant Operations Expenses</b>	
3 <u>Contracted Maintenance Expenses</u>	
4 <u>Repairs of Sewer Plant - Pump Repair</u>	
5 <u>Repairs of Sewer Plant - Treatment Plant Repair</u>	
6 <u>Repairs of Sewer Plant - Collecting Sewers and Manhole Repair</u>	
7 <u>Repairs of Sewer Plant - Equipment Repair</u>	
8 <u>Repairs of Sewer Plant - Other (Attach Explanation)</u>	
9 <u>Utility Bills</u>	
10 <u>Chemicals</u>	
11 <u>Sludge Hauling Expenses</u>	
12 <u>Effluent Testing Expenses</u>	
13 <b>Total Plant Operations Expenses (Take Total to Page S-1 Line 7)</b>	
<b>Tax Expenses</b>	
14 <u>Tax Expense - Property Taxes</u>	
15 <u>Tax Expense - Payroll Taxes</u>	
16 <u>Tax Expense - Franchise Taxes</u>	
17 <u>Tax Expense - Other Taxes</u>	
18 <u>Tax Expense - Federal Income Taxes</u>	
19 <u>Tax Expense - State Income Taxes</u>	
20 <u>Tax Expense - Investment Tax Credits</u>	
21 <b>Total Tax Expenses (Take Total to Page S-1, Line 19)</b>	

Company Name: \_\_\_\_\_

**SEWER UTILITY PLANT IN SERVICE**

ACCOUNTS (a)	Balance First of Year (b)	Additions During Year (c)	Retirements During Year (d)	Balance End of Year (e)
<b>INTANGIBLE PLANT</b>				
3 Organization (301) .....				
4 Franchise and consents (302) .....				
5 Miscellaneous intangible plant (303) .....				
<b>LAND AND STRUCTURES</b>				
6 Land and land rights (310) .....				
7 Structures and improvements (311) .....				
<b>COLLECTION PLANT</b>				
8 Collection Sewers - Force (352.1) .....				
9 Collection Sewers - Gravity (352.2) .....				
10 Other Collection Plant Facilities (353) .....				
11 Services to Customers (354) .....				
12 Flow Measuring Devices (355) .....				
<b>PUMPING PLANT</b>				
13 Receiving Wells and Pump Pits (362) .....				
14 Pumping equipment (363) .....				
<b>TREATMENT AND DISPOSAL PLANT</b>				
15 Oxidation Lagoon (372) .....				
16 Treatment and disposal equipment (373) .....				
17 Plant sewers (374) .....				
18 Outfall Sewer Lines (375) .....				
19 Other treatment and disposal plant				
20 Equipment (376) .....				
<b>GENERAL PLANT</b>				
21 Office furniture and equipment (391) .....				
22 Transportation equipment (392) .....				
23 Other general equipment (393) .....				
24 <b>TOTAL SEWER UTILITY PLANT IN SERVICE</b> .....				

\* All entries should be supported by records which identify the property being added or retired, its location, and its original cost in as much detail as reasonably possible. If adjustments are included in columns "C" and or "D" please explain. Use additional sheets if necessary.

25 \_\_\_\_\_

26 \_\_\_\_\_

27 \_\_\_\_\_

28 \_\_\_\_\_

29 \_\_\_\_\_

30 \_\_\_\_\_

31 \_\_\_\_\_

32 \_\_\_\_\_

2 Company Name: \_\_\_\_\_

**DEPRECIATION RESERVE - SEWER UTILITY PLANT**

			Retirements of Property				
Annual Depr. Rate % (f)	Annual Depr. Expense (g)	Balance First of Year (h)	Book Cost of Plant Retired (i)	Cost of Removal (j) *	Salvage Credit (k) *	Other Changes (l) **	Balance End of Year (m)
3							
4							
5							
6							
7							
8							
9							
10							
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14							
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17							
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19							
20							
21							
22							
23							
24							

**NOTE:** Amounts included in Column "I" should be the same as in "D" on the preceding page.

\*All entries included in Columns "J" and "K" should be supported by records which identify the property retired and the cost of removal or salvage in as much detail as reasonably possible.

\*\*Report below the details for these entries. Use additional sheets if necessary.

25 \_\_\_\_\_

26 \_\_\_\_\_

27 \_\_\_\_\_

28 \_\_\_\_\_

29 \_\_\_\_\_

30 \_\_\_\_\_

31 \_\_\_\_\_

32 \_\_\_\_\_

Company Name: \_\_\_\_\_

**GENERAL INFORMATION - SEWER**

1 Treatment facilities (Describe Process): \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 Was your treatment plant constructed in place or purchased as a package unit? \_\_\_\_\_

7 \_\_\_\_\_

8 Were your lift stations constructed in place or purchased as package units? \_\_\_\_\_

9 \_\_\_\_\_

10 What is the designed capacity of your treatment facilities? \_\_\_\_\_

11 \_\_\_\_\_

12 What percent of designed capacity is currently being utilized? \_\_\_\_\_

13 Name of current operator \_\_\_\_\_

14 Treatment process of liquid waste: \_\_\_\_\_

15 \_\_\_\_\_

16 Treatment process of waste solids: \_\_\_\_\_

17 \_\_\_\_\_

18 Where is the point of discharge of liquid waste? \_\_\_\_\_

19 \_\_\_\_\_

20 What is the ultimate disposal of waste solids and how obtained? \_\_\_\_\_

21 \_\_\_\_\_

22 Any equipment failures occurring during year (State when and briefly describe failure and correcting repairs made). \_\_\_\_\_

23 \_\_\_\_\_

24 \_\_\_\_\_

25 \_\_\_\_\_

26 \_\_\_\_\_

**COLLECTING SEWERS (FEET)**

	Kind of Pipe (Cast Iron, VCP, PVC, etc.) (a)	Diameter Of Pipe (b)	First of Year (c)	Added (d)	Removed or Abandoned (e)	End of Year (f)
27	Force: _____					
28						
29						
30	Gravity: _____					
31						
32						
33						
34						
35						

**LIFT STATIONS**

	Location	Pumps: Name, Size, Type	H.P.	GPM	TDH
36					
37					
38					
39					
40					
41					

Water and/or Sewer Annual Report of \_\_\_\_\_  
for the year ended December 31, \_\_\_\_\_

### VERIFICATION

The foregoing report must be verified by the oath of the President, Treasurer, General Manager or Receiver of the company. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken.

### OATH

State Of \_\_\_\_\_  
County Of \_\_\_\_\_ } ss:

\_\_\_\_\_ makes oath and says that  
(Insert here the name of the affiant)

s/he is \_\_\_\_\_  
(Insert here the official title of the affiant)

of \_\_\_\_\_  
(Insert here the exact legal title or name of the respondent)

that s/he has examined the foregoing report; that to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent.

\_\_\_\_\_, \_\_\_\_\_, to and including \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
(Signature of affiant)

Subscribed and sworn before me, a \_\_\_\_\_ in and for the  
State and county above named, this \_\_\_\_\_ day of \_\_\_\_\_, 20

My Commission expires \_\_\_\_\_, 20

\_\_\_\_\_  
(Signature of officer authorized to administer oaths)

Missouri Revised Statutes § 392.210

Original must be mailed to:  
Manager of the Data Center  
MoPSC, 200 Madison Street, Suite 100  
P.O. Box 360, Jefferson City, MO 65102-0360